

Private Contracts with Doctors and Other Practitioners Who Have Decided Not to Provide Services Through the Medicare Program

A Private Contract is a contract between a Medicare beneficiary and a doctor or other practitioner who has decided not to provide

services through the Medicare program (not bill for any service or supplies to any Medicare beneficiary for at least 2 years).

Under a Private Contract:

+ No Medicare payment will be made for the services you receive.

+ You will have to pay whatever the doctor or practitioner charges you with no limit on the charges for Medicare approved services (the limiting charge will not apply).

+ Medicare Managed Care Plans will not pay for these services.

+ No claim should be submitted, and Medicare will not pay if one is.

+ If you have a Supplemental Insurance (Medigap) Policy, it will not pay anything for this service.

+ Many other insurance plans also will not pay for the service.

The Private Contract only applies to the services provided by the doctor who asked you to sign it. You cannot be asked to sign a Private Contract when you are facing an emergency or urgent health situation. If you want to pay on your own for services the Original Medicare Plan doesn't cover, your doctor does not have to leave Medicare or

ask you to sign a Private Contract. You are always free to obtain non-covered services on your own if you choose to pay for the service yourself.

It may be helpful to talk with someone in your State Health Insurance Assistance Program before signing a Private Contract with any doctor or practitioner.

For more information, visit: <http://www.medicare.gov>
or call your State Health Insurance Assistance Program.

